

02/17/87

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type. (Form designed for use on ellipse (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A X 0 0 Q 0 6 1 7 1 3		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address May Company 617 Sunset Blvd., Arcadia, CA 91006						A. State Manifest Document Number 86544125			
4. Generator's Phone (818) 509-4604						B. State Generator's ID CAX000061713			
5. Transporter 1 Company Name Omega Recovery Services				6. US EPA ID Number C A D 0 4 2 2 4 5 0 0 1		C. State Transporter's ID 701738			
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone 213/698-0991			
9. Designated Facility Name and Site Address Omega Recovery Services 12504 E. Whittier Blvd. Whittier, CA 90602						10. US EPA ID Number CA D 0 4 2 2 4 5 0 0 1		E. State Transporter's ID	
								F. Transporter's Phone	
								G. State Facility's ID CADO42245001	
								H. Facility Phone 213/698-0991	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity	
a. Hazardous Waste Liquid NOS ORM-E NA 9189 (R-11)						08 DM		800 P	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information See Gordon Kennedy or the Receiving Mgr. Material is to be down at dock level.									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.									
Printed/Typed Name G. Legg						Signature Gordon Kennedy		Month Day Year 02/20/87	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name TIM BATTIERA						Signature Tim Battiera		Month Day Year 02/20/87	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature		Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name FRANK FORD						Signature Frank Ford		Month Day Year 02/24/87	

86544125